## CHOPTANK ELECTRIC COOPERATIVE, INC **SCHEDULING COORDINATOR DESIGNATION FORM**

6.0 All inquiries, communications or notices relating to the Electricity Supplier' use of the Scheduling Coordinator designated above may be directed to the following representatives:

To the Electricity Supplier:		
Name:		
Address:		
PJM Short Name:		
DUNs Number plus 4:		
Attn:		
Title:		
Telephone:		-
Facsimile:		-
E-mail:		
To the Scheduling Coordinate	or:	
Name:		
Address:		
	- <u></u>	
Attn:		
Title:		
Telephone:		-
Facsimile:		-
E-mail:		_

Filed: May 1, 2020 Effective: July 28, 2020

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- 7.0 The Choptank Electricity Supplier Coordination Tariff is incorporated herein by reference and made a part hereof. All capitalized terms used, but not defined, in this designation form shall have the meaning stated in the Choptank Electricity Supplier Coordination Tariff.
- 8.0 The Electricity Supplier has executed this designation form below by its duly authorized representative as follows:

Company Na	ıme		
Signature:			
Name:			
Title:			
Date:			
this designati Coordinator: designated S consent to its by the terms Designation I	Acknowledgme Intending to be legally bound thereby scheduling Coordinator has executed appointment as a Scheduling Coordinator and conditions of its designation set of the Electricity Supplements as the Electricity Supplements and the Electricity Supplements are supplementation.	the following Acknowledgment and Coduly authorized representative of the Sent and Consent  To the duly authorized representative of this document below to acknowledge dinator, and to further state its agreement forth above in the Scheduling Coordinater, including the terms and condition which is incorporated therein by reference.	cheduling above- and ant to abide ator as of the
Company Na	ıme:		
Signature:			
Name:			
Title:			

10.0 The Electricity Supplier shall complete a separate Scheduling Coordinator Designation Form for each Scheduling Coordinator.

Date:

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